BETHESDA DIERKER OLSON FDD

700	HOFFMANN	סמ	
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WATERTOWN 53094 Phone: (920) 261-305	0	Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation	: 366	Highest Level License:	FDDs
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	180	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/04):	180	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	176	Average Daily Census:	199

Services Provided to Non-Residents	Age, Gender, and Primary Di	Length of Stay (12/31/04)						
Home Health Care	No	Primary Diagnosis	%	Age Groups	*	Less Than 1 Year	4.5	
Supp. Home Care-Personal Care	No					1 - 4 Years	12.5	
Supp. Home Care-Household Services	ld Services No   Developmental Disabili		100.0	Under 65	79.5	More Than 4 Years	83.0	
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	7.4			
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	7.4		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	5.1	*********	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.6	Full-Time Equivalent		
Congregate Meals No		Cancer	0.0	İ		Nursing Staff per 100 Resident		
Home Delivered Meals	No	Fractures	0.0	İ	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	0.0	65 & Over	20.5			
Transportation	No	Cerebrovascular	0.0			RNs	7.8	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs	12.5	
Other Services	Yes	Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for	j	Other Medical Conditions	0.0	Male	46.6	Aides, & Orderlies	100.4	
Mentally Ill	No			Female	53.4	İ		
Provide Day Programming for	j		100.0	İ		İ		
Developmentally Disabled	Yes			j	100.0	j		
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## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	<b>!</b>		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				175	100.0	205	0	0.0	0	1	100.0	277	0	0.0	0	0	0.0	0	176	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		175	100.0		0	0.0		1	100.0		0	0.0		0	0.0		176	100.0

County: Jefferson Facility ID: 1600 Page 2

BETHESDA DIERKER OLSON FDD

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Admissions, Discharges, and	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04									
Deaths During Reporting Period							m-+-1			
			_		% Needing		Total			
Percent Admissions from:		Activities of			sistance of	-	Number of			
	69.0	Daily Living (ADL)			Or Two Staff	-	Residents			
Private Home/With Home Health	0.0	Bathing	2.3		32.4	65.3	176			
Other Nursing Homes	0.0	Dressing	5.1		33.5	61.4	176			
Acute Care Hospitals	0.0	Transferring	21.0		41.5	37.5	176			
Psych. HospMR/DD Facilities	24.1	Toilet Use	8.5		27.8	63.6	176			
Rehabilitation Hospitals	0.0	Eating	33.0		26.7	40.3	176			
Other Locations	6.9	*******	******	*****	******	*******	******			
Total Number of Admissions	29	Continence		%	Special Treat	ments	%			
Percent Discharges To:		Indwelling Or Extern	al Catheter	0.6	Receiving R	espiratory Care	5.7			
Private Home/No Home Health	31.7	Occ/Freq. Incontinen	t of Bladder	77.3	Receiving T	racheostomy Care	0.0			
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	51.1	Receiving S	uctioning	0.0			
Other Nursing Homes	1.6				Receiving O	stomy Care	1.7			
Acute Care Hospitals	0.0	Mobility			Receiving T	ube Feeding	12.5			
Psych. HospMR/DD Facilities	23.8	Physically Restraine	ed.	0.0	Receiving M	echanically Altered Diets	70.5			
Rehabilitation Hospitals	0.0	<u> </u>								
Other Locations	31.7	Skin Care			Other Residen	t Characteristics				
Deaths	11.1	With Pressure Sores		4.0	Have Advanc	e Directives	3.4			
Total Number of Discharges		With Rashes		9.7	Medications					
(Including Deaths)	63	İ			Receiving P	sychoactive Drugs	15.9			

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This		'DD		All	
	Facility		ilities		ilties	
	%	8	Ratio	8	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	92.9	93.1	1.00	88.8	1.05	
Current Residents from In-County	6.3	35.3	0.18	77.4	0.08	
Admissions from In-County, Still Residing	0.0	11.4	0.00	19.4	0.00	
Admissions/Average Daily Census	14.6	20.4	0.72	146.5	0.10	
Discharges/Average Daily Census	31.7	28.3	1.12	148.0	0.21	
Discharges To Private Residence/Average Daily Census	10.1	12.1	0.83	66.9	0.15	
Residents Receiving Skilled Care	0.0	0.0	0.00	89.9	0.00	
Residents Aged 65 and Older	20.5	16.0	1.28	87.9	0.23	
Title 19 (Medicaid) Funded Residents	99.4	99.1	1.00	66.1	1.50	
Private Pay Funded Residents	0.6	0.5	1.11	20.6	0.03	
Developmentally Disabled Residents	100.0	99.2	1.01	6.0	16.57	
Mentally Ill Residents	0.0	0.4	0.00	33.6	0.00	
General Medical Service Residents	0.0	0.4	0.00	21.1	0.00	
Impaired ADL (Mean)*	70.1	55.0	1.28	49.4	1.42	
Psychological Problems	15.9	48.1	0.33	57.7	0.28	
Nursing Care Required (Mean)*	13.0	10.7	1.21	7.4	1.75	